



Please type a plus sign (+) inside this box $\longrightarrow +$

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

			Attorney Docket Number	er /RAY4066P0010US				
DECLARA	CLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	First Named Inventor	Erol Tan					
			COMPLETE IF KNOWN					
• • • • • • •		Application Number						
Declaration Submitted with Initial Filing			Filing Date					
	OR		Group Art Unit					
	Filing (surcharge (37 CFR 1.16 (e)) required)		Examiner Name					

As a below named inventor, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
A SOFT, STRONG, ABSORBENT MATERIAL FOR USE IN ABSORBENT ARTICLES								
the specification of which (Title of the Invention) is attached hereto								
OR was filed on (MM/DD/YYYY) 01/15/1998 as United States Application Number or PCT International								
Application Number PCT/US98/00639 and was amended on (MM/DD/YYYY) (if applicable).								
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application	Country	Foreign Filing Date	Priority Not Claimed	Certifled Copy Attached?				
Number(s)	Country	(MMVDD/YYYY)	Not Claimed	YES NO				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number		e (MM/DD/YYYY)						
				Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.				

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Zutphen

Additional inventors are being named on the

City

State



Please type a plus sign (+) inside this box

PTO/SB/01 (12-97) Approved for use through 9/30/00. OMB 0651-0032 Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Netherlands

Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

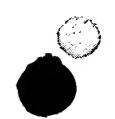
DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. Parent Patent Number U.S. Parent Application or PCT Parent Parent Filing Date (if applicable) (MM/DD/YYYY) Number 10/10/1997 08/948,987 01/17/1997 08/784,536 Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Place Customer Number Bar Code OR l ahel here Registered practitioner(s) name/registration number listed below Registration Registration Name Number Number Name 38,978 Lisa V. Mueller 28,332 Paul M. Odell 25,440 Joel E. Siegel 38,872 Randall T. Erickson 29,116 Paul M. Vargo 28,846 Stephen D. Geimer 24,103 Allen J. Hoover 25,011 Martin L. Katz 24,713 Keith V. Rockey 20,635 <u>John P. Milnamow</u> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. OR X Correspondence address below Direct all correspondence to: Customer Number or Bar Code Label Rockey, Milnamow & Katz, Ltd. Name Two Prudential Plaza, Suite 4700 <u>Address</u> 180 North Stetson Avenue **Address** 60601 ILZIP Chicago State City (312) 616-5460 Telephone (312) 616-5400 U.S.A. Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Family Name or Surname Given Name (first and middle [if any]) Tan Erol 406/07/99 Inventor's Date Signature CA Netherlands Citizenship Country Zutphen State Residence: City Het Zwanenvlot 123 **Post Office Address Post Office Address**

ZΙΡ

7206 CG





Please type a plus sign (+) inside this box ->

valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2__ of _2_

		_									
Name of Additional Joint Inventor, if any:											
Given Name (first and middle [if any]) Family Name or Sumame											
Peter R.					Abitz					,	
Inventor's Signature											
Residence: City	St. Simmons Island	State	GA		Country	U.S.A.		Citizenshi	р	U.S.	
Post Office Address	308 Brailsford Pl.										
Post Office Address											
City	St. Simmons Island	State	GA.		ZIP	31522	Countr	y U	S.	Α.	
Name of Additional Joint Inventor, if any:											
Given Name (first and middle [if any])					Family Name or Surname						
Kays					Chinai						
inventor's Signature						T		Date			
Residence: City	St. Simmons Island	State	GA		Country U.S.A.			Citizens	Citizenship U.S.		
Post Office Address	608 Brockinton D	608 Brockinton Drive									
Post Office Address	ass										
City	St. Simmons Island	State	GA		ZIP	31522	Cou	ntry [U.S.A.		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any]) Family Name or Sumame											
Inventor's Signature				T					Date		
Residence: City		State			Country			Citizen	Citizenship		
Post Office Address											
Post Office Address	,							<u></u>			
City		State			ZIP			Country		hidual assa A	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.